

Strategic Goal Four

Contributing to the Nation's Well-Being

Strategic Objective 4.1

Emergency Preparedness

Improve the Nation's preparedness for response to war, terrorism, national emergencies, and natural disasters by developing plans and taking actions to ensure continued service to veterans as well as support to national, state, and local emergency management and homeland security efforts.

Making a Difference for the Veteran



VA police officers and facility engineer work on the generator at the New Orleans VAMC after Hurricane Katrina. They were among the many employees who stayed behind to ensure the safe evacuation of the patients at the medical center and to try to limit the amount of damage to the facility from the hurricane.

Hurricane Season

During hurricane season, the Department of Health and Human Services (HHS) often requests VA health care staff from across the country to support health and medical needs. VA employees not only provide aid to states in need, but also to the many sister VA facilities in stricken areas.

In responding to Hurricane Katrina, the Department's emergency preparedness planning paid off, and VA took care of veterans in the stricken area. Within the three-state disaster area of Louisiana, Mississippi, and Alabama, there are approximately 1 million veterans of which 400,000 receive health care and 140,000 financial benefits. In the aftermath of Hurricane Katrina, VA lost two medical centers, one regional benefits office, five outpatient clinics, and one national cemetery.

In the immediate days after the hurricane, VA successfully evacuated nearly 800 people from the New Orleans VA Medical Center (VAMC): 252 patients by Air National Guard and 500 staff and family members by bus. All patients were treated at medical centers in the region. Not one

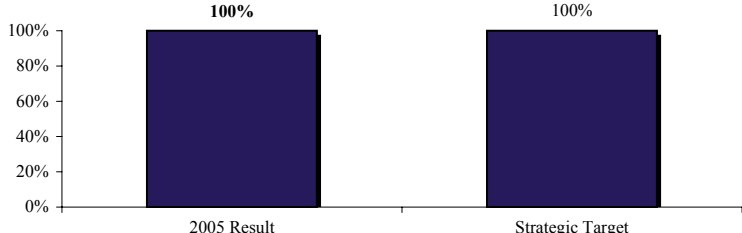
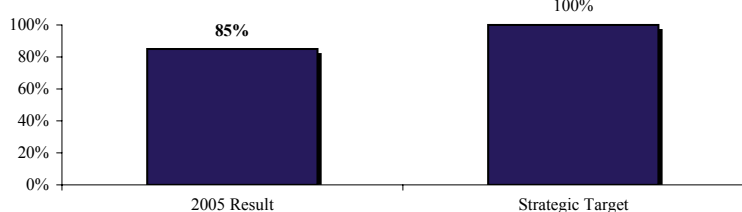
Hurricane Season, continued

life was lost in this evacuation. All patients in the Gulfport VAMC and 70 patients from the Biloxi VAMC were evacuated before the hurricane hit. VHA sent an initial deployment of 238 volunteers to the Gulf region to assist in caring for the displaced veterans and relieve affected employees. Eleven mobile clinics were sent to the affected area to provide continued care for veterans. VBA representatives were also deployed to shelters to reach out to veterans, offer assistance, and explain benefits.

In support of its National Response Plan partners, VA deployed 12 mental health professionals and provided space to house two 250-bed medical shelters being stood up by HHS at the Alexandria, Louisiana, VAMC. Under the National Disaster Medical System, 18 VA Federal Coordinating Centers were activated with 8 centers processing the majority of approximately 2,000 evacuees. VHA identified space in VA facilities that could be used as transitional housing for evacuees, while VBA provided the Federal Emergency Management Agency with an inventory of all VA-reposessed homes nationwide that might eventually be used to house evacuees. NCA assisted in drafting a mortuary plan to be used for mass burials and the procurement of body bags. VA also mobilized \$1.3 million in critical pharmaceuticals and medical supplies to the State of Mississippi through VA's National Acquisition Center as well as provided large stocks of pharmaceuticals and medical supplies to VAMCs that received evacuees.

On October 3, 2005, the Senate by unanimous consent adopted a resolution of praise for the "employees and volunteers of the Department of Veterans Affairs, who risked life and limb to assist veterans, staff, and their respective families who were affected by Hurricane Katrina."

Performance Trends and Impact of FY 2005 Results

Performance Trend	FY 2005 Impact
<p>Supporting Measure Percent of VA Emergency Planners who have completed orientation*</p>  <p>100% 100%</p> <p>2005 Result Strategic Target</p> <p>*The 2005 plan number is not available.</p>	<p>The 2005 achievement indicates that those in VA responsible for developing continuity of operations plans and guaranteeing VA will continue to provide essential functions understand their responsibilities for emergency preparedness planning and the directives governing such planning.</p>
<p>Supporting Measure Percent of VA Leadership who certify their teams "ready to deploy" to their COOP site</p>  <p>85% 100%</p> <p>2005 Result Strategic Target</p> <p>*The 2005 plan number is not available.</p>	<p>The 2005 achievement indicates that the majority of VA's leadership knows the requirements for maintaining continuity of operations (COOP) and service to veterans and that their organizations have plans in place and are ready to relocate to an alternate site if necessary. As demonstrated by Hurricane Katrina in September 2005, continuity of operations is essential to veterans, their families, and the community at large.</p>

Related Information

Major Management Challenges

The following major management challenges have been identified for this strategic objective:

OIG

- Security and Safety (see page 208 for more details)

GAO

- Prepare for Biological and Chemical Acts of Terrorism (see page 223 for more details)

- Establishing Appropriate and Effective Information-Sharing Mechanisms to Improve Homeland Security: A High-Risk Area (see page 229 for more details)

Program Evaluations

VA completed a *Survey Assessment of VA Medical Centers' Emergency Preparedness*, which analyzed facility and staff preparedness including issues such as medical center back-

up utilities, lab, pharmacy, psychiatric services, security, administration, and internal medicine. Deliverables included an automated Web-based survey assessment tool, which provides for follow-up assessments at regular intervals. The study found that VA's strengths are in the areas of planning, establishing command and control structures, and having a strong surge capability to increase the capacity for beds, personnel, medications, and supplies. Areas needing improvement included coordination and administration, communication, logistics and resource management, and training. Among the recommendations were that VA strive for greater consistency in planning and full redundancy of critical systems at each VAMC. Also, VA should refine the survey, re-administer it to track progress, and compare it with the HHS survey of non-federal hospitals. VA is currently negotiating a contract to refine the online survey tool, develop a comparison document of VA and HHS survey data, and share the survey findings with DoD.

VA conducted a contract staffing analysis to assess the extent to which VA has sufficient personnel with the requisite skills and training who could be assembled to meet external emergency preparedness commitments while still maintaining essential services and operations during a catastrophic emergency. The contractor developed a comprehensive training framework and facility-specific guidelines for preparing occupant emergency plans. The analysis identified potential family support activities during an emergency situation. The contractor also conducted a comparative market analysis of occupant surveillance systems, reviewed the issuance of security clearances, and identified standards for the criteria used to determine the vulnerabilities associated with hiring or employing foreign nationals. VA's Strategic Management Council is considering an action plan outlining the necessary actions, timeline, and resource commitments to implement the recommendations.

VA also conducted an *Essential Paper Records Study*. The study assessed VA's ability to sufficiently safeguard and reconstitute essential paper records during and after a catastrophic event that disrupts the provision of benefits and services to veterans and their families. It also analyzed the process and procedures for maintaining, protecting, securing, and reconstituting paper records for business operations essential to each VA administration and certain headquarters functions. The study found that the greatest vulnerabilities relate to VA's overflow storage for paper records where the standard of care and protection was frequently found to be

extremely low. VA has alerted facilities to the risks posed to these records, and Records Management program officials in Central Office are instituting abatement plans to deal with vulnerabilities.

Program Assessment Rating Tool (PART) Evaluation

No PART evaluations have been completed that specifically address this objective.

New Policies and Procedures

The Department has participated in major governmentwide exercises designed to respond to chemical and biological acts and has conducted internal continuity of operations exercises. The Department also established a new comprehensive emergency management program to address continuity of operations, as required by Federal Preparedness Circular 65.

Other Important Results

The National Institute of Building Sciences conducted physical vulnerability assessments to study mission-critical VA facilities and provided recommendations to mitigate identified vulnerabilities. As a follow-up, VA will conduct full assessments at sites where CARES major projects are planned and expand analytical capability of the Physical Security Database to better track progress in addressing identified vulnerabilities.

Strategic Objective 4.2

Medical Research and Development

Advance VA medical research and development programs that address veterans' needs, with an emphasis on service-connected injuries and illnesses, and contribute to the Nation's knowledge of disease and disability.

Making a Difference for the Veteran



Improving veterans health and well-being through research and development

Innovative Research on Behalf of Veterans

VA researchers William M. Grady, MD, and Kevin Volpp, MD, PhD, along with 58 scientists from 7 other federal agencies, received Presidential Early Career Awards for Scientists and Engineers from President Bush at the White House in June. These annual awards were established in 1996 to recognize top young scientists and engineers for their “innovative research, which is at the frontiers of science and technology,” and their “exceptional potential to shape the future through intellectual and inspired leadership.” Both VA recipients are part of VA’s career development program. Grady, a gastroenterology researcher at the VA Puget Sound Healthcare System in Seattle, studies the mechanisms of colon cancer, which is a major cause of cancer-related deaths among VA’s patient population. His lab focuses on how cancer cells in the colon become resistant to a specific growth factor, or protein, in the body that normally suppresses tumors. Grady is also an assistant professor at the University of Washington School of Medicine and an investigator at the Fred Hutchinson Cancer Research Center. Volpp is a staff physician and health services researcher at the Philadelphia VA Medical Center, and an assistant professor of medicine and healthcare systems at the Wharton School and School of Medicine of the University of Pennsylvania. His research concerns how economics affect the quality of health care. Among the issues he has studied are the influence of HMOs on cardiac outcomes, financial incentives to promote smoking cessation, and VA’s role in reducing health care disparities.

Performance Trends and Impact of FY 2005 Results

Performance Trend	FY 2005 Impact										
<p style="text-align: center;">Key Measure Number of peer-reviewed publications by VA investigators</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2005 Result</td> <td>2,665*</td> </tr> <tr> <td>2005 Plan</td> <td>2,558</td> </tr> <tr> <td>2006 Plan</td> <td>2,590</td> </tr> <tr> <td>Strategic Target</td> <td>2,700</td> </tr> </tbody> </table> <p>* Estimated actual. Final data are not yet available.</p>	Category	Value	2005 Result	2,665*	2005 Plan	2,558	2006 Plan	2,590	Strategic Target	2,700	<p>VA's projected result for 2005 surpasses our goal of achieving 2,558 peer-reviewed publications that show VA as the affiliated institution of the first author. The result is a quantifiable representation of the degree to which research results are used to improve health care. In addition, our achievement is a quantitative indicator of the productivity of the overall research enterprise as well as the degree to which it benefits veterans and the Nation.</p>
Category	Value										
2005 Result	2,665*										
2005 Plan	2,558										
2006 Plan	2,590										
Strategic Target	2,700										

Related Information

Major Management Challenges

Neither VA's Office of Inspector General nor the Government Accountability Office identified any major management challenges related to this objective.

Program Evaluations

No independent program evaluations have been conducted that specifically address this objective.

Program Assessment Rating Tool (PART) Evaluation

In relation to this strategic objective, the Administration conducted a PART evaluation of VA's Medical Research and Development program during 2005. The rating has not yet been issued.

New Policies and Procedures

The following new policies and procedures were established in 2005:

- VA investigators and research offices have been informed that it is their responsibility to ensure that VA affiliation and support are acknowledged on all public reports and presentations including publications, media interviews, and other professional activities in which the results of research are formally presented. VA must be acknowledged first when: (1) the investigator has a five-eighths or more VA appointment; (2) work was funded primarily by VA resources, either directly or indirectly; or (3) the research was conducted primarily in VA facilities.
- VA established a mechanism to facilitate collaboration with private industry to conduct trials in key disease areas that impact the veteran population.

- VA is publicizing—via a Web site—clinical trials in which veterans can participate.
- VA standardized a process for registering clinical trials on ClinicalTrials.gov, a Web site that provides up-to-date information about federally and privately supported clinical research using human volunteers.
- VA's Program Office for Research Integrity Development & Education provided new training for the Human Research Protection Program (HRPP). The training included three 2-day HRPP courses on the basics of human research protection regulations, guidance, and implementation for individuals new to their human research protection responsibilities and a 2-day course on HRPP for research compliance officers.

Other Important Results

The VA Research Career Development program is designed to train and retain VA clinicians who will conduct research of high relevance to VA health care. In 2005 VA increased training opportunities for clinician-investigators. The number of clinician-investigators who remain with VA 3 years after the completion of their career development award period is a good indicator of the effectiveness of the program. The 2005 results (projected) show a 69 percent retention rate, exceeding the target of 63 percent.

Strategic Objective 4.3

Academic Partnerships

Sustain partnerships with the academic community that enhance the quality of care to veterans and provide high-quality educational experiences for health care trainees.

Making a Difference for the Veteran



Worthen Award for academic excellence

Worthen Award for Academic Excellence

Phyllis A. Guze, M.D., Chair of the Medicine Department and Director of the Medical Care Line at VA Greater Los Angeles Healthcare System has been honored by VA as recipient of the David M. Worthen Award for Academic Excellence. Dr. Guze has made significant contributions to medical education and VA's mission in several key areas. She provided visionary leadership in developing curricula in both VA Ambulatory Care education and Women's Health, well before these were recognized national priorities. Dr. Guze also served as Dean of Education for the UCLA School of Medicine and created what would become models for mutually beneficial affiliations. In that role, she also was instrumental in overseeing the efforts of UCLA to modernize the undergraduate medical curriculum. Many of those innovations have endured and are being used as models by other schools of medicine. Dr. Guze has also made considerable contributions to the administration of medical education programs. She was a pioneer in recognizing issues such as power abuse and sexual harassment in physician residency programs and medical schools. Dr. Guze has served as mentor and role model for countless students, residents, fellows, and junior faculty. Through her contributions to medical education, ranging from individual mentorship to the strategic influence on the future of national medical education, Dr. Guze has exemplified the best achievements of VA's academic mission.

Dr. Guze was presented the prestigious award with a plaque at the VHA National Leadership Board meeting in March 2005. This is the highest award given by VHA to recognize outstanding achievements of national significance in health professions education.

Performance Trend and Impact of FY 2005 Result

Performance Trend	FY 2005 Impact																		
<p style="text-align: center;">Supporting Measure Medical residents' and other trainees' scores on a VHA Survey assessing their clinical training experience</p> <p style="text-align: center;">* Actual data through August 2005. Final data are not yet available.</p> <table border="1"> <thead> <tr> <th>Year/Category</th> <th>Score</th> </tr> </thead> <tbody> <tr> <td>2001</td> <td>84</td> </tr> <tr> <td>2002</td> <td>83</td> </tr> <tr> <td>2003</td> <td>83</td> </tr> <tr> <td>2004</td> <td>84</td> </tr> <tr> <td>2005 Result</td> <td>84*</td> </tr> <tr> <td>2005 Plan</td> <td>85</td> </tr> <tr> <td>2006 Plan</td> <td>85</td> </tr> <tr> <td>Strategic Target</td> <td>85</td> </tr> </tbody> </table>	Year/Category	Score	2001	84	2002	83	2003	83	2004	84	2005 Result	84*	2005 Plan	85	2006 Plan	85	Strategic Target	85	<p>VA's 2005 score of 84 nearly met the target score of 85. Since VA is the largest provider of health care training in the country, continued satisfaction of medical residents and other trainees indicates their training experiences are of high quality. This benefits VA in its ability to attract highly trained and qualified health care professionals, which results in high-quality health care for the veteran.</p>
Year/Category	Score																		
2001	84																		
2002	83																		
2003	83																		
2004	84																		
2005 Result	84*																		
2005 Plan	85																		
2006 Plan	85																		
Strategic Target	85																		

Related Information

Major Management Challenges

Neither VA's Office of Inspector General nor the Government Accountability Office identified any major management challenges related to this objective.

Program Evaluations

No independent program evaluations have been conducted that specifically address this objective.

Program Assessment Rating Tool (PART) Evaluation

The Administration conducted a PART evaluation of VA's Medical Care program during 2003. However, the evaluation did not specifically cover any aspects of the medical education program.

New Policies and Procedures

VA issued a new directive on educational affiliation agreements requiring such agreements to be in place before trainees in non-VA education programs receive clinical training at VA facilities and before trainees in VA-sponsored programs receive training at non-VA facilities. In the past, institutions sending trainees to VA facilities for fewer than 40 hours per year—or for observation only—were exempt from the requirement.

VA issued a new resident supervision handbook outlining procedural requirements pertaining to the supervision of residents and focusing on resident supervision from the educational perspective. The handbook reflects new standards for documentation of supervision in various settings.

Other Important Results

The fourth system-wide Learners' Perceptions Survey was conducted to provide information to support VHA's performance measure for its teaching mission. The survey provides a discrete measure of the quality of VA's teaching mission and identifies areas of excellence and opportunities for improvement in the clinical training experience. This effort will enhance the quality of care for VA patients. The reports include comparative results of the past 2 years' surveys by type of trainee as well as facility highlights to assist management in identifying areas for improvement.

The Annual Report on Residency Training programs, now in its third year online, was extensively updated in 2005 to increase ease of entry and facilitate VISN and VHA oversight of compliance with resident supervision policy.

Strategic Objective 4.4

Socioeconomic Well-Being of Veterans

Enhance the socioeconomic well-being of veterans, and thereby the Nation and local communities, through veterans' benefits; assistance programs for small, disadvantaged, and veteran-owned businesses; and other community initiatives.

Making a Difference for the Veteran



VA reaches out to veteran-owned and service-disabled veteran-owned small businesses

Providing Opportunities for Small Business

VA was recently ranked among top government agencies based on business opportunities provided to diversity-owned businesses. Over 350,000 women and minority-owned businesses had the opportunity to vote in an online election conducted by DiversityBusiness.com. VA works hard to create and maintain opportunities for small businesses. Thorough market research is conducted to locate qualified small business concerns for large procurements, such as the recent prime vendor contract awards for medical and surgical products, which included awards to five small business concerns. Contract bundling reviews ensure consolidation does not occur at the expense of the small business community. Alternative acquisition strategies increase contract opportunities for small businesses, with a special emphasis on service-disabled veteran-owned small business firms. VA is working to be the leader in contracting with service-disabled veteran-owned businesses.

Performance Trend and Impact of FY 2005 Result

Performance Trend	FY 2005 Impact																		
<p style="text-align: center;">Supporting Measure Attainment of statutory minimum goals for small business expressed as a percent of total procurement</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Attainment (%)</th> </tr> </thead> <tbody> <tr> <td>2001</td> <td>32.6%</td> </tr> <tr> <td>2002</td> <td>31.2%</td> </tr> <tr> <td>2003</td> <td>31.8%</td> </tr> <tr> <td>2004</td> <td>28.5%</td> </tr> <tr> <td>2005 Result</td> <td>27.8%*</td> </tr> <tr> <td>2005 Plan</td> <td>23.0%</td> </tr> <tr> <td>2006 Plan</td> <td>23.0%</td> </tr> <tr> <td>Strategic Target</td> <td>23.0%</td> </tr> </tbody> </table> <p>* Data reported through November 3, 2005. FY 2005 data have not been finalized. Final data will be available in March 2006.</p>	Year	Attainment (%)	2001	32.6%	2002	31.2%	2003	31.8%	2004	28.5%	2005 Result	27.8%*	2005 Plan	23.0%	2006 Plan	23.0%	Strategic Target	23.0%	<p>As part of its work on behalf of all veterans, VA provides economic opportunities to veteran-owned small business and service-disabled veteran-owned small business firms through its procurement of goods and services. During the latter portion of 2005, VA senior leadership strengthened its focus on these small business goals during Monthly Performance Reviews. As a result of this heightened emphasis, we expect our performance on this measure to improve in 2006.</p>
Year	Attainment (%)																		
2001	32.6%																		
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Related Information

Major Management Challenges

Neither VA's Office of Inspector General nor the Government Accountability Office identified any major management challenges related to this objective.

Program Evaluations

No independent program evaluations have been conducted that specifically address this objective.

Program Assessment Rating Tool (PART) Evaluation

No PART evaluations have been completed that specifically address this objective.

New Policies and Procedures

In October 2004 the President issued Executive Order 13360, *Providing Opportunities for Service-Disabled Veteran Businesses to Increase Their Federal Contracting and Subcontracting*. In February 2005 VA senior leadership approved an aggressive strategy to increase contracting opportunities for such businesses. VA's implementation strategy and those of other departments and agencies are posted for public review at <http://www.vetbiz.gov/fpp/fpp.htm>.

VA strategies include the following:

- Reserving VA contracts exclusively for service-disabled veteran-owned small businesses.
- Encouraging and facilitating participation by service-disabled veteran-owned small businesses in competitions for award of VA contracts.
- Training VA personnel on applicable law and policies relating to participation of service-disabled veteran-owned small businesses in federal contracting.

Strategic Objective 4.5

Maintaining National Cemeteries as Shrines

Ensure that national cemeteries are maintained as shrines dedicated to preserving our Nation's history, nurturing patriotism, and honoring the service and sacrifice veterans have made.

Making a Difference for the Veteran



*The Soldiers' Monument at Dayton
National Cemetery*

Memorials Inventory Project

VA has just completed a more than 2-year effort to catalog every memorial on its grounds. Since national cemeteries were established in 1862, they have become the sites of memorials erected to recall distinctive heroics, group burials, and related commemorations. These memorials range from modest blocks of stone, sundials, and tablets affixed to boulders to more sophisticated obelisks and single soldiers on granite pedestals. The Memorials Inventory Project, based on the national Save Outdoor Sculpture inventory project, used volunteers to document, measure, and photograph monuments and memorials on National Cemetery Administration (NCA) grounds. In all, 372 volunteers worked on the project and documented more than 1,000 different memorial objects found at VA national cemeteries. The project raised awareness about national cemeteries, their history, and the soldiers and sailors interred in these national shrines. VA will share information on its sculpture monuments with the public through the Smithsonian Museum's art inventory database. NCA will also create a searchable online database so that information and photographs of all its memorials will be available to the public.

Performance Trend and Impact of FY 2005 Result

Performance Trend	FY 2005 Impact																		
<p style="text-align: center;">Key Measure Percent of Respondents Who Rate National Cemetery Appearance as Excellent</p> <table border="1"> <thead> <tr> <th>Year/Target</th> <th>Percent of Respondents Who Rate National Cemetery Appearance as Excellent</th> </tr> </thead> <tbody> <tr> <td>2001</td> <td>96%</td> </tr> <tr> <td>2002</td> <td>97%</td> </tr> <tr> <td>2003</td> <td>97%</td> </tr> <tr> <td>2004</td> <td>98%</td> </tr> <tr> <td>2005 Result</td> <td>98%</td> </tr> <tr> <td>2005 Plan</td> <td>98%</td> </tr> <tr> <td>2006 Plan</td> <td>99%</td> </tr> <tr> <td>Strategic Target</td> <td>100%</td> </tr> </tbody> </table>	Year/Target	Percent of Respondents Who Rate National Cemetery Appearance as Excellent	2001	96%	2002	97%	2003	97%	2004	98%	2005 Result	98%	2005 Plan	98%	2006 Plan	99%	Strategic Target	100%	<p>National cemeteries carry expectations of appearance that set them apart from private cemeteries. Our Nation is committed to create and maintain these sites as national shrines. The 2005 score reflects VA's commitment to maintain the appearance of national cemeteries as national shrines so that bereaved family members are comforted when they come to the cemetery for the interment, or later to visit the grave(s) of their loved one(s). Our Nation's veterans have earned the appreciation and respect not only of their friends and families, but also of the entire country and our allies.</p>
Year/Target	Percent of Respondents Who Rate National Cemetery Appearance as Excellent																		
2001	96%																		
2002	97%																		
2003	97%																		
2004	98%																		
2005 Result	98%																		
2005 Plan	98%																		
2006 Plan	99%																		
Strategic Target	100%																		

Related Information

Major Management Challenges

Neither VA's Office of Inspector General nor the Government Accountability Office identified any major management challenges related to this objective.

Program Evaluations

The Veterans Millennium Health Care and Benefits Act, Public Law 106-117, directed VA to contract for an independent study to look at various issues related to the National Shrine Commitment and its focus on cemetery appearance. Volume 3: Cemetery Standards of Appearance was published in March 2002. This report served as a planning tool and reference guide in the task of reviewing and refining VA's operational standards and measures.

In August 2002, Volume 2: National Shrine Commitment was completed. This report identified the one-time repairs needed to ensure a dignified and respectful setting appropriate for each national cemetery. VA is using the information in this report to address repair and maintenance needs at national cemeteries.

Program Assessment Rating Tool (PART) Evaluation

In relation to this strategic objective, the Administration conducted a PART evaluation of VA's Burial program during 2002, which resulted in a rating of "Moderately Effective." Please see Summary Table 3 on page 57 for more information.

New Policies and Procedures

Using the recommendations in the Volume 3 report mentioned above and building on previous efforts, VA has established standards and measures by which NCA can determine the effectiveness and efficiency of its operations. These standards and measures identify performance expectations in key operational processes including interments, grounds maintenance, and headstones and markers.

NCA has established an Organizational Assessment and Improvement Program to identify and prioritize improvement opportunities and to enhance program accountability by

providing managers and staff at all levels with one NCA “scorecard.” As part of the program, assessment teams conduct site visits to all national cemeteries on a rotating basis to validate performance reporting.

In order to ensure a high-performing, well-trained workforce, VA established the National Cemetery Administration Training Center. Initially focused on training cemetery directors and assistant directors, the new facility will eventually expand its classes to train supervisors, equipment operators, grounds keepers, cemetery representatives, and other employees. As 11 new national cemeteries become operational, the center’s efforts will help ensure consistency in operations throughout the national cemetery system as well as a high-performing workforce and well-trained staff for key positions. In 2005 the first class of cemetery director interns graduated. They were assigned to leadership positions at national cemeteries throughout the country.

NCA is partnering with the National Center for Preservation Technology and Training (NCPTT), an office of the National Park Service (NPS), to conduct a materials conservation and treatment analysis of government-issued marble veteran headstones issued from the 1870s through 1973. Second to VA, NPS has the largest number of national cemeteries, including Gettysburg National Cemetery, under its jurisdiction. Through a 2-year interagency agreement, NCPTT will identify alternatives for cleaning historic headstones based upon criteria such as cost effectiveness and environmentally and historic-resource friendly chemicals.

In 2004 NCA launched a Web-based (Internet) Nationwide Gravesite Locator (NGL) system. The system contains more than 3 million records of veterans and dependents buried in VA’s 121 cemeteries since the Civil War. It also has records of some burials in state veterans cemeteries and burials in Arlington National Cemetery from 1999 to the present. Making it easier to identify burial locations may bring more visitors to the honored resting places that VA considers national shrines and historical treasures.

Other Important Results

The willingness to recommend the national cemetery to veteran families during their time of need is an expression of loyalty toward that national cemetery. In 2005, 98 percent of survey respondents (family members and funeral directors who have recently received services from a national cemetery) indicated

they would recommend the national cemetery to veteran families during their time of need.

To ensure the appearance of national cemeteries meets the standards our Nation expects of its national shrines, VA performed a wide variety of grounds management functions including raising, realigning, and cleaning headstones to ensure uniform height and spacing and to improve appearance. The rows of pristine, white headstones that are set at the proper height and correct alignment provide the vista that is the hallmark of many VA national cemeteries. In 2005 VA collected data that showed that 70 percent of headstones and/or markers in national cemeteries are at the proper height and alignment; 72 percent of headstones, markers, and niche covers are clean and free of debris or objectionable accumulations; and 84 percent of gravesites in national cemeteries had grades that were level and blended with adjacent grade levels. In 2005 National Shrine Commitment projects were initiated at 13 national cemeteries. These projects will raise, realign, and clean more than 110,000 headstones and markers and renovate gravesites in nearly 100 acres. While attending to these highly visible aspects of our national shrines, VA also maintained roads, drives, parking lots, and walks; painted buildings, fences, and gates; and repaired roofs, walls, and irrigation and electrical systems.

VA continued its partnerships with various civic organizations that provide volunteers and other participants to assist in maintaining the appearance of national cemeteries. For example, an interagency agreement with the Bureau of Prisons provides for the use of selected prisoners to perform work at national cemeteries. Under a joint venture with VHA, national cemeteries provide therapeutic work opportunities to veterans receiving treatment in the Compensated Work Therapy/Veterans Industries program. The national cemeteries are provided a supplemental workforce while giving veterans the opportunity to work for pay, regain lost work habits, and learn new work skills.

NCA is working with VA’s Office of the General Counsel (OGC) and an outside patent counsel to obtain patents for NCA “technology.” VA has applied for patents for NCA’s combined mower/trimmer invention and for the swiveling hearse carrier. NCA is also working with OGC to develop a licensing strategy for the potential transfer of technologies to private sector entities.